

August 1, 2011

Montana Health Care Programs Notice

Personal Assistance Services

Effective August 1, 2011

Personal Assistance Service Providers Reimbursement Rate Change

The one-time funding that was allocated in the 2009 session for the FY 2010 provider rate increase was not sustained in the Personal Assistance Services budgets. Thus, the provider rates will be decreased by 2%. The rates will be effective August 1, 2011.

The current fee schedule is posted on the Provider Information [website](#) under *Resources by Provider Type, Personal Assistance, Fee Schedules*.

Proc	Mod	Mod	Description	Effective	Fee
A0080			Non-Emergency Transportation – per mile	10/1/2008	\$0.33
T1019			Personal Assistance Services – 15 min	8/1/2011	\$4.45–\$4.96
T1019	TE		Nurse Supervision Personal Assistance Services – 15 min	8/1/2011	\$4.45–\$4.96
T2001			Medical Escort	8/1/2011	\$4.45–\$4.96
T1019	U9		Self-Directed Personal Assistance Services – 15 min	8/1/2011	\$3.68–\$4.16
T1019	U9	TE	Self-Directed Oversight Personal Assistance Services – 15 min	8/1/2011	\$3.68–\$4.16
T2001	U9		Medical Escort	8/1/2011	\$3.68–\$4.16

Contact Information

For rate or policy questions, contact Abby Holm at abholm@mt.gov or (406) 444-4564.

For questions about this provider notice, contact Craig Bender at cbender2@mt.gov or (406) 444-4376.

For claims questions or additional information, contact Provider Relations:

Provider Relations toll-free in- and out-of-state: 1-800-624-3958

Helena: (406) 442-1837

E-mail: MTPRHelpdesk@ACS-inc.com

Visit the Provider Information website:

<http://medicaidprovider.hhs.mt.gov>